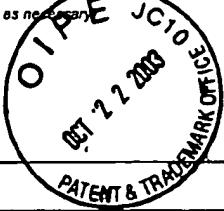
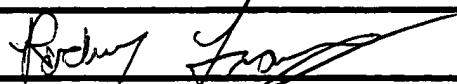


Substitute for form 144SA/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>		Complete if Known	
		Application Number	10/622,838
		Filing Date	July 18, 2003
		First Named Inventor	Laun, Robert
		Group Art Unit	Unknown
		Examiner Name	Unknown
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Examiner Initials*	Cite No ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.				T ²
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EXAMINER  DATE CONSIDERED

Substitute Disclosure Statement Form (PTO-1449)

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. 1 Applicant's unique citation designation number (optional) 2 Applicant is to place a check mark here if English language Translation is attached